Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
AKRON		
Case number (if known)	Chapter you are filing under:	
	☐ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	■ Chapter 13	☐ Check if this is an amended filing

Voluntary Petition for Individuals Filing for Bankruptcy

04/20

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pa	rt 1: Identify Yourself			
		About Debtor 1:		About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name			
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport).	Christopher First name Eric Middle name	- -	First name Middle name
	Bring your picture identification to your meeting with the trustee.	Reed Last name and Suffix (Sr., Jr., II, III)	-	Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years	•		
	Include your married or maiden names.			
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-2919		

About Debtor 1:		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):	
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	■ I have not used any business name or EINs. Business name(s) EIN	☐ I have not used any business name or EINs. Business name(s) EIN	
5.	Where you live	4620 Lobustours Dr	If Debtor 2 lives at a different address:	
		A620 Laburnum Dr. Akron, OH 44319 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code	
		Summit County	County	
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.	
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code	
6.	Why you are choosing this district to file for	Check one:	Check one:	
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	

residence?

Yes.

Has your landlord obtained an eviction judgment against you?

No. Go to line 12.

Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A) and file it with this bankruptcy petition.

Deb	otor 1 Christopher Eric Re	eed			Case number (if known)	
Par	Report About Any Bu	ısinesses	You Ow	n as a Sole Propriet	tor	
12.	. Are you a sole proprietor of any full- or part-time ■ No. Go to Part 4. business?			Part 4.		
		☐ Yes.	Nam	e and location of bus	iness	
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name	e of business, if any		
	If you have more than one sole proprietorship, use a separate sheet and attach		Numl	ber, Street, City, Stat	te & ZIP Code	
	it to this petition.		Chec	ck the appropriate bo	x to describe your business:	
				Health Care Busir	ness (as defined in 11 U.S.C. § 101(27A))	
				Single Asset Real	Estate (as defined in 11 U.S.C. § 101(51B))	
				Stockbroker (as d	efined in 11 U.S.C. § 101(53A))	
				Commodity Broke	r (as defined in 11 U.S.C. § 101(6))	
				None of the above		
13.	Are you filing under Chapter 11 of the Bankruptcy Code, and are you a small business debtor or a debtor as defined by 11 U.S.C. § 1182(1)?	If you are filing under Chapter 11, the court must know whether you are a small business debtor or a debtor choosing to proceed under Subchapter V so that it can set appropriate deadlines. If you indicate that you are a small business debtor or you are choosing to proceed under Subchapter V, you must attach your most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).				
	For a definition of small	■ No.	I am	not filing under Chap	oter 11.	
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am Code		11, but I am NOT a small business debtor according to the definition in the Bankruptcy	
		☐ Yes.			11, I am a small business debtor according to the definition in the Bankruptcy Code, and d under Subchapter V of Chapter 11.	
		☐ Yes.			11, I am a debtor according to the definition in § 1182(1) of the Bankruptcy Code, and I Subchapter V of Chapter 11.	
Par	t 4: Report if You Own or	Have Any	/ Hazard	ous Property or An	y Property That Needs Immediate Attention	
14.	Do you own or have any	■ No.				
	property that poses or is alleged to pose a threat of imminent and identifiable hazard to	☐ Yes.	What is	the hazard?		
	public health or safety? Or do you own any property that needs immediate attention?			diate attention is , why is it needed?		
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where i	s the property?		
					Number, Street, City, State & Zip Code	

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

15. Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

П

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Official Form 101

Deb	tor 1 Christopher Eric Re	eed		Case number (if k	nown)			
Par	6: Answer These Quest	ions for Re	eporting Purposes					
16.	you have? ind		Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."					
			☐ No. Go to line 16b.					
			Yes. Go to line 17.					
		16b.	Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.					
			☐ No. Go to line 16c.					
			☐ Yes. Go to line 17.					
		16c.	State the type of debts you owe th	at are not consumer debts or business de	bts			
17.	Are you filing under Chapter 7?	■ No.	I am not filing under Chapter 7. Go	o to line 18.				
	Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?	☐ Yes.		u estimate that after any exempt property e to distribute to unsecured creditors?	is excluded and administrative expenses			
			□ No					
			☐ Yes					
18.	How many Creditors do you estimate that you owe?	■ 1-49 □ 50-99 □ 100-19 □ 200-99		☐ 1,000-5,000 ☐ 5001-10,000 ☐ 10,001-25,000	☐ 25,001-50,000 ☐ 50,001-100,000 ☐ More than100,000			
19.	How much do you estimate your assets to be worth?	□ \$100,0	50,000 01 - \$100,000 001 - \$500,000 001 - \$1 million	□ \$1,000,001 - \$10 million □ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million	□ \$500,000,001 - \$1 billion □ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion □ More than \$50 billion			
20.	How much do you estimate your liabilities to be?	□ \$100,0	50,000 01 - \$100,000 001 - \$500,000 001 - \$1 million	□ \$1,000,001 - \$10 million □ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million	☐ \$500,000,001 - \$1 billion ☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion			
Par	7: Sign Below							
For	you	I have ex	amined this petition, and I declare u	under penalty of perjury that the information	on provided is true and correct.			
		If I have of United St	chosen to file under Chapter 7, I am ates Code. I understand the relief a	e under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, understand the relief available under each chapter, and I choose to proceed under Chapter 7.				
				ne and I did not pay or agree to pay someone who is not an attorney to help me fill out this I and read the notice required by 11 U.S.C. § 342(b).				
		I request	relief in accordance with the chapte	er of title 11, United States Code, specified	d in this petition.			
	I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1 and 3571. /s/ Christopher Eric Reed							
		Christop	her Eric Reed of Debtor 1	Signature of Debtor 2				
		Executed	on May 3, 2021 MM / DD / YYYY	Executed on MM / DD	D/YYYY			

Debtor 1	Christopher Eric Reed	Case number (if known)	
		•	

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page.

I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Dean D. Signature of	Paolucci Attorney for Debtor	Date	May 3, 2021 MM / DD / YYYY
Dean D. Pa	aolucci 0081997		
Paolucci La	aw		
1 Cascade Akron, OH Number, Street,			
Contact phone	330-474-9529	Email address	dean@paoluccilawfirm.com
0081997 O			

	n this information to identify your case:		
Debt	or 1 Christopher Eric Reed First Name Middle Name Last Name		
Debt	or 2 Se if, filing) First Name Middle Name Last Name		
` '	ed States Bankruptcy Court for the: AKRON		
Case (if kno	e numberwn)	☐ Che	eck if this is an
		ame	ended filing
	icial Form 106Sum		
	nmary of Your Assets and Liabilities and Certain Statistical Information complete and accurate as possible. If two married people are filing together, both are equally responsible for		12/15
infor	nation. Fill out all of your schedules first; then complete the information on this form. If you are filing amendo original forms, you must fill out a new <i>Summary</i> and check the box at the top of this page.		
			assets e of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$_	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$_	37,807.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	37,807.00
Part	2: Summarize Your Liabilities		
			liabilities unt you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$_	31,065.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$_	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$_	37,480.00
	Your total liabilities	\$	68,545.00
Part	3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$_	3,405.00
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$_	2,750.00
Part	4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ur other:	schedules.
7.	■ Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.	a persor	al, family, or

Official Form 106Sum Summary of Your Assets and Liabilities and Certain Statistical Information

page 1 of 2

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the court with your other schedules.

Best Case Bankruptcy

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

8. **From the Statement of Your Current Monthly Income:** Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$_____4,334.00

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total clair	n
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

Fill in this info	rmation to identify your ca	se and this filing:			
Debtor 1	Christopher Eric Ree	Middle Name	Last Name		
Debtor 2		Wilder Name	Last Name		
(Spouse, if filing)	First Name	Middle Name	Last Name		
United States B	ankruptcy Court for the: A	KRON			
Case number					☐ Check if this is an
					amended filing
00000	400 A /D				
	orm 106A/B				
Schedu	le A/B: Prope	rty			12/15
think it fits best.	Be as complete and accurate a re space is needed, attach a s	as possible. If two married pe	. If an asset fits in more than or cople are filing together, both ar n the top of any additional page	re equally responsible for s	upplying correct
Part 1: Describe	e Each Residence, Building, L	and, or Other Real Estate You	J Own or Have an Interest In		
1. Do you own or	have any legal or equitable in	terest in any residence, build	ling, land, or similar property?		
■ No. Go to Pa	art 2.				
☐ Yes. Where	is the property?				
Part 2: Describe	e Your Vehicles				
3. Cars, vans, t □ No ■ Yes	rucks, tractors, sport utilit	y vehicles, motorcycles			
3.1 Make:	Cadillac	Who has an interest i	n the property? Check one		claims or exemptions. Put
Model:	CT5	Debtor 1 only	in the property: Check one		red claims on Schedule D: aims Secured by Property.
Year:	2020	Debtor 2 only		Current value of the	Current value of the
Approxima Other info	ate mileage: 950	Debtor 1 and Debtor At least one of the	•	entire property?	portion you own?
	ndition. LEASE.	At least one of the o	deptors and another		
		Check if this is co	mmunity property	\$30,286.00	\$30,286.00
Examples: Bo No Yes Add the doll pages you h	ats, trailers, motors, persona	al watercraft, fishing vessels I own for all of your entrie rite that number here	rehicles, other vehicles, and a specific state of the second state	y entries for	\$30,286.00 Current value of the
	-				portion you own? Do not deduct secured claims or exemptions.

D	ebtor 1 Chri	stopher Eric Reed	Case number	(if known)
6.	 Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware □ No 			
	Yes. Descri	ibe		
		misc. used household goods a	nd furnishings	\$3,300.00
7.		luding cell phones, cameras, media players, ga	digital equipment; computers, printers, scanne ames	rs; music collections; electronic devices
		misc. used items		\$560.00
8.		iques and figurines; paintings, prints, or other a er collections, memorabilia, collectibles	artwork; books, pictures, or other art objects; s	amp, coin, or baseball card collections;
9.	Examples: Spo	sical instruments	equipment; bicycles, pool tables, golf clubs, ski	s; canoes and kayaks; carpentry tools;
		used equipment		\$200.00
	■ No □ Yes. Descri	veryday clothes, furs, leather coats, designer w		
		used clothing		\$1,400.00
12	2. Jewelry Examples: Ev ☐ No ■ Yes. Descr		t rings, wedding rings, heirloom jewelry, watche	es, gems, gold, silver
	■ No □ Yes. Descri	ogs, cats, birds, horses	eady list, including any health aids you did	not list
		specific information		

De	ebtor 1	Chris	topher E	ric Ree	ed			Case number (if known)	
15							3, including any entries for pa	ges you have attached	\$5,710.00
D۵	ort 4: De	scriba V	our Financ	rial Acco	te				
						rest in any	of the following?		Current value of the portion you own? Do not deduct secured claims or exemptions.
16.	■ No					-	in a safe deposit box, and on h	and when you file your petitic	n
17.	Deposi Examp	oles: Che	ecking, sa				s; certificates of deposit; shares n the same institution, list each.	in credit unions, brokerage h	ouses, and other similar
	Yes						Institution name:		
				17.1.	checking a	account	Fifth Third Bank		\$0.00
				17.2.	checking a	account	Citizen's Bank		\$1,811.00
18.		oles: Bor	nd funds,		cly traded sto ent accounts Institution or	with brokera	age firms, money market accou	nts	
19.	joint v	ublicly t enture	raded sto	ock and	interests in	incorporate	ed and unincorporated busine	esses, including an interest	in an LLC, partnership, and
	■ No □ Yes.	Give sp	ecific info		about them me of entity:			% of ownership:	
20.	Negoti	iable ins	truments	include	personal chec	ks, cashier	ole and non-negotiable instrur s' checks, promissory notes, an er to someone by signing or deli	nd money orders.	
		Give sp	ecific info		about them suer name:				
21.			pension erests in I			01(k), 403(k	o), thrift savings accounts, or oth	ner pension or profit-sharing p	olans
		List eac	h accoun		tely. of account:		Institution name:		
22.	Your s	hare of		d depos	its you have m		t you may continue service or u lic utilities (electric, gas, water),		ies, or others
	☐ Yes.						Institution name or individual	l:	
	■ No	`		•	odic payment one and descrip	•	you, either for life or for a numb	per of years)	
	☐ Yes		155	outi ildî	ne and descil	AIOH.			
24.					n an account and 529(b)(1)		fied ABLE program, or under	a qualified state tuition pro	gram.

D	ebtor 1	Christophe	r Eric Reed		Case number ((if known)
	■ No					
	☐ Yes		Institution name and de	escription. Separately file the re	ecords of any interests.11 U.S.C.	§ 521(c):
25	Trusts	, equitable or	future interests in pro	perty (other than anything lis	sted in line 1), and rights or po	wers exercisable for your benefit
	☐ Yes.	Give specific	information about them.			
26				crets, and other intellectual p c, proceeds from royalties and l		
		Give specific	information about them.			
27			s, and other general in permits, exclusive licens		ldings, liquor licenses, professior	nal licenses
	☐ Yes.	Give specific	information about them.			
M	loney or	property owe	d to you?			Current value of the portion you own? Do not deduct secured claims or exemptions.
28	_	funds owed to	you			
	■ No □ Yes.	Give specific in	nformation about them,	including whether you already	filed the returns and the tax year	S
29		support ples: Past due	or lump sum alimony, s	pousal support, child support, r	maintenance, divorce settlement,	property settlement
	☐ Yes.	Give specific in	nformation			
30	Exam _l	<i>ples:</i> Unpaid w	eone owes you ages, disability insurand unpaid loans you made		, sick pay, vacation pay, workers	s' compensation, Social Security
	■ No □ Yes.	Give specific	information			
31		sts in insuranc oles: Health, di		e; health savings account (HSA	s); credit, homeowner's, or renter	's insurance
		Name the insu		n policy and list its value.	Deserticies :	Commendan on welford
			Company name	.	Beneficiary:	Surrender or refund value:
32	If you			om someone who has died bect proceeds from a life insura	ance policy, or are currently entitle	ed to receive property because
	_	Give specific	information			
33				ot you have filed a lawsuit or insurance claims, or rights to	made a demand for payment sue	
		Describe each	h claim			
34	_	contingent an	d unliquidated claims	of every nature, including co	ounterclaims of the debtor and	rights to set off claims
	■ No □ Yes.	Describe each	n claim			
35	_ `	nancial assets	you did not already li	st		
	■ No □ Yes.	Give specific	information			
Of	ficial Form	m 106A/B		Schedule A/B: Prop	ertv	page 4

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Deb	otor 1	Christopher Eric Reed		Case number (if known)	
36.		ne dollar value of all of your entries from Part 4, includin rt 4. Write that number here			\$1,811.00
Part	5: Des	cribe Any Business-Related Property You Own or Have an Inter	est In. List any real esta	ate in Part 1.	
37. C	Do you o	wn or have any legal or equitable interest in any business-relate	ed property?		
	No. Go	to Part 6.			
	Yes. G	o to line 38.			
Part		cribe Any Farm- and Commercial Fishing-Related Property You ou own or have an interest in farmland, list it in Part 1.	Own or Have an Interes	st In.	
46. I	Do you	own or have any legal or equitable interest in any farm-	or commercial fishir	ng-related property?	
	No. 0	Go to Part 7.			
	☐ Yes.	Go to line 47.			
_	Do you <i>Examp</i> ■ No	Describe All Property You Own or Have an Interest in That You have other property of any kind you did not already list? Jes: Season tickets, country club membership Give specific information			
54.	Add tl	ne dollar value of all of your entries from Part 7. Write the	at number here		\$0.00
Part	8:	List the Totals of Each Part of this Form			
55.	Part 1	: Total real estate, line 2			\$0.00
56.	Part 2	: Total vehicles, line 5	\$30,286.00		
57.	Part 3	: Total personal and household items, line 15	\$5,710.00		
58.	Part 4	: Total financial assets, line 36	\$1,811.00		
59.	Part 5	: Total business-related property, line 45	\$0.00		
60.	Part 6	: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7	: Total other property not listed, line 54 +	\$0.00		
62.	Total	personal property. Add lines 56 through 61	\$37,807.00	Copy personal property total	\$37,807.00
63.	Total	of all property on Schedule A/B. Add line 55 + line 62			\$37,807.00

Fill in this information to identify your case:								
Debtor 1	Christopher Eric R	eed						
	First Name	Middle Name	Last Name					
Debtor 2								
(Spouse if, filing)	First Name	Middle Name	Last Name					
United States Ba	ankruptcy Court for the:	AKRON						
Case number _					☐ Check if this is an amended filing			
<u> </u>					amended filing			

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property			Specific laws that allow exemption		
	Copy the value from Schedule A/B	Che	ck only one box for each exemption.		
misc. used household goods and furnishings	\$3,300.00		\$3,300.00	Ohio Rev. Code Ann. § 2329.66(A)(4)(a)	
Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit	2020.00(1)(1)(0)	
misc. used items Line from Schedule A/B: 7.1	\$560.00		\$560.00	Ohio Rev. Code Ann. § 2329.66(A)(4)(a)	
End none dovicedure / v.E. 111			100% of fair market value, up to any applicable statutory limit	2020.00(1)(1)(u)	
used equipment Line from Schedule A/B: 9.1	\$200.00		\$200.00	Ohio Rev. Code Ann. § 2329.66(A)(4)(a)	
Enterior Gonedale / V.B. G. T			100% of fair market value, up to any applicable statutory limit	2020.00(1)(1)(4)	
used clothing Line from Schedule A/B: 11.1	\$1,400.00		\$1,400.00	Ohio Rev. Code Ann. § 2329.66(A)(4)(a)	
Life from Schedule A.B. 11.1			100% of fair market value, up to any applicable statutory limit	2020.00(\(\)(\(\)(\(\))(\(\))	
misc. used jewelry Line from Schedule A/B: 12.1	\$250.00		\$250.00	Ohio Rev. Code Ann. § 2329.66(A)(4)(b)	
Line from Soriedule A.D. 12.1			100% of fair market value, up to any applicable statutory limit	2020.00(17)(17)(0)	

Official Form 106C

Schedule C: The Property You Claim as Exempt

page 1 of 2

Best Case Bankruptcy

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption	
	Copy the value from Schedule A/B	Check only one box for each exemption.		
checking account: Fifth Third Bank Line from Schedule A/B: 17.1	\$0.00	■ 75% 100% of fair market value, up to	Ohio Rev. Code Ann. § 2329.66(A)(13)	
		any applicable statutory limit		
checking account: Fifth Third Bank Line from Schedule A/B: 17.1	\$0.00	\$150.00	Ohio Rev. Code Ann. § 2329.66(A)(3)	
		☐ 100% of fair market value, up to any applicable statutory limit	,	
checking account: Citizen's Bank Line from Schedule A/B: 17.2	\$1,811.00	\$500.00	Ohio Rev. Code Ann. § 2329.66(A)(3)	
and norm donedule /vE. 17.2		☐ 100% of fair market value, up to any applicable statutory limit	2020.00(1)(0)	
checking account: Citizen's Bank	\$1,811.00	\$1,325.00	Ohio Rev. Code Ann. § 2329.66(A)(18)	
and none conocato / v.b. 11.2		100% of fair market value, up to any applicable statutory limit	2020.00(1)(10)	

3. Are vo	u ciaiming a	nomestead	exemption of	r more tnan	\$170.350?
-----------	--------------	-----------	--------------	-------------	-------------------

(Subject to adjustment on 4/01/22 and every 3 years after that for cases filed on or after the date of adjustment.)

- No
- ☐ Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

 - ☐ Yes

Fill	in this information to identify yo	ur case:				
Deb	tor 1 Christopher Eric	Reed				
	First Name	Middle Name	Last Name			
	tor 2 use if, filing) First Name	Middle Name	Last Name			
Unit	ed States Bankruptcy Court for the	e: AKRON				
Coo	o number					
(if kno	e number				☐ Check	if this is an
					ameno	led filing
∩ffi	cial Form 106D					
	hedule D: Creditor:	s Who Have Claim	s Secured	hy Property	. 1	12/15
<u> </u>	riedule D. Creditor.	s willo Have Clain	is secured	by Froperty	<u>y</u>	12/13
	complete and accurate as possible eded, copy the Additional Page, fill it					
	per (if known).	,				
1. Do	any creditors have claims secured b	by your property?				
	☐ No. Check this box and submit	this form to the court with your o	ther schedules. Yo	u have nothing else to	report on this form.	
	Yes. Fill in all of the information	below.				
Part	1: List All Secured Claims					
2. Li:	st all secured claims. If a creditor has	more than one secured claim. list the	e creditor separately	Column A	Column B	Column C
for e	ach claim. If more than one creditor han as possible, list the claims in alphabe	as a particular claim, list the other cre	ditors in Part 2. As	Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
2.1	GM Financial	Describe the property that secu	res the claim:	\$31,065.00	\$30,286.00	\$779.00
	Creditor's Name	2020 Cadillac CT5 9500 m Good condition. LEASE.	niles			
	Box 181145	As of the date you file, the clain	n is: Check all that			
	Arlington, TX 76096	apply. Contingent				
	Number, Street, City, State & Zip Code	☐ Unliquidated				
		☐ Disputed				
Who	owes the debt? Check one.	Nature of lien. Check all that ap	ply.			
	ebtor 1 only	An agreement you made (such	h as mortgage or secu	ıred		
	ebtor 2 only	car loan)				
	Pebtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien	, mechanic's lien)			
	t least one of the debtors and another	☐ Judgment lien from a lawsuit				
	check if this claim relates to a community debt	☐ Other (including a right to offset	et)			
Date	debt was incurred 2020	Last 4 digits of account i	number <u>2919</u>			

	d the dollar value of your entries in			\$31,06	5.00	
	his is the last page of your form, add ite that number here:	a the dollar value totals from all pa	iges.	\$31,06	5.00	
Part	2: List Others to Be Notified f	or a Debt That You Already Lis	sted			

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

page 1 of 1

Fill in th	nis information to i	dentify your case	:				
Debtor 1	1 Christo	pher Eric Reed					
	First Name		Middle Name	Last Name			
Debtor 2 (Spouse if,			Middle Name	Last Name			
(Spouse II,	ming) First Name	;	Middle Name	Last Name			
United S	States Bankruptcy C	ourt for the: AK	RON				
Case nu	ımber						
(if known)							Check if this is an
							amended filing
Officia	al Form 106E/	_					
			Have Unsecured	Claime			12/15
			t 1 for creditors with PRIORITY		Part 2 for araditors with NON	DDIODITY o	
Schedule left. Attac	D: Creditors Who Ha h the Continuation Pa I case number (if kno	ve Claims Secured age to this page. If y	Leases (Official Form 106G). Do by Property. If more space is no you have no information to report to the Claims.	eeded, copy	the Part you need, fill it out,	number the	entries in the boxes on the
	ny creditors have pri						
_	lo. Go to Part 2.	only unscoured clai	mis against you i				
Ц ,	es.						
Part 2:	List All of Your I	NONPRIORITY Un	secured Claims				
3. Do a	ny creditors have no	priority unsecured	claims against you?				
□N	lo. You have nothing to	report in this part. S	ubmit this form to the court with y	our other sch	edules.		
■ Y	es.						
unse	cured claim, list the cre one creditor holds a pa	ditor separately for e	in the alphabetical order of the each claim. For each claim listed, other creditors in Part 3.If you ha	identify what	type of claim it is. Do not list cla	aims already	included in Part 1. If more
T GIT							Total claim
4.1	AMEX/DSNB		Last 4 digits of acco	unt number	2919		\$396.00
	Nonpriority Creditor's N	lame					
	9111 Duke Blvd	0 0000	When was the debt i	incurred?	2015		
_	Mason, OH 45040 Number Street City Sta		As of the date you fi	le, the claim	is: Check all that apply		
,	Who incurred the del	t? Check one.	·				
	Debtor 1 only		☐ Contingent				
	Debtor 2 only		☐ Unliquidated				
	☐ Debtor 1 and Debto	or 2 only	☐ Disputed				
	☐ At least one of the	debtors and another	Type of NONPRIORI	TY unsecure	d claim:		
	☐ Check if this clain		y Student loans				
	debt				aration agreement or divorce th	at you did no	t
	Is the claim subject to	o ortset?	report as priority claim				
	■ No		•		ng plans, and other similar debt	S	
	∏ Yes		Othor Chasify C	redit card			

Schedule E/F: Creditors Who Have Unsecured Claims

Page 1 of 8

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30366

Debto	or 1 Christopher Eric Reed		Case number (if known)	
4.2	Capital One Bank	Last 4 digits of account number	2919	\$964.00
	Nonpriority Creditor's Name POB 30281	When was the debt incurred?	2015	
	Salt Lake City, UT 84130 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured	l alaim.	
	At least one of the debtors and another	Student loans	i Claiii.	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	_	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	■ Other. Specify credit card		
4.3	Capital One/WMT Nonpriority Creditor's Name	Last 4 digits of account number	2919	\$715.00
	PO Box 30285	When was the debt incurred?	2018	
	Salt Lake City, UT 84130 Number Street City State Zip Code	Ac of the data you file the claim i	C. Charle all that apply	
	Who incurred the debt? Check one.	As of the date you file, the claim i	5. Спеск ан тат арру	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	l claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	Other. Specify credit card		
4.4	CB Indigo Nonpriority Creditor's Name	Last 4 digits of account number	2919	\$168.00
	PO Box 4499 Beaverton, OR 97076	When was the debt incurred?	2017	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	l claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	Other. Specify credit card		
		• -		

Schedule E/F: Creditors Who Have Unsecured Claims

Page 2 of 8

Citibank/BRKSB	Last 4 digits of account number	2919	\$632.0
Nonpriority Creditor's Name PO Box 6241 Sioux Falls, SD 57117-6241	When was the debt incurred?	2014	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
Check if this claim is for a community debt		aration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims Debts to pension or profit-sharin	a plane, and other similar debte	
■ No □ Yes	Other. Specify credit card	ig plans, and other similar debts	
Li Tes	Other. Specify Credit card		
Community Loan Servicing, LLC Nonpriority Creditor's Name	Last 4 digits of account number	2919	\$8,888.00
PO Box 740410 Cincinnati, OH 45274	When was the debt incurred?	2021	
Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.			
■ Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community debt	☐ Student loans		
Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	■ Other. Specify prior mortga	age	
Discover Nonpriority Creditor's Name	Last 4 digits of account number	2919	\$2,147.0
P.O. Box 29019 Phoenix, AZ 85038	When was the debt incurred?	2016	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
■ Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	Other. Specify credit card		

Schedule E/F: Creditors Who Have Unsecured Claims

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Debto	or 1 Christopher Eric Reed		Case number (if known)			
4.8	First Premier Bank	Last 4 digits of account number	2919	\$269.00		
	Nonpriority Creditor's Name 601 S. Minnesota Ave. Sioux Falls, SD 57104	When was the debt incurred?	2018			
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply			
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured	t claim:			
	At least one of the debtors and another	☐ Student loans	. J.			
	☐ Check if this claim is for a community debt Is the claim subject to offset?	_	ration agreement or divorce that you did not			
	No	Debts to pension or profit-sharin	g plans, and other similar debts			
	Yes	Other Specify credit card				
4.9	TND One he		2040	£4.247.00		
4.9	FNB Omaha Nonpriority Creditor's Name	Last 4 digits of account number	2919	\$1,347.00		
	1620 Dodge St. Omaha, NE 68197	When was the debt incurred?	2018			
	Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply			
	Who incurred the debt? Check one.	,				
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not			
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts			
	Yes	Other. Specify credit card				
4.1	Kohls/Capital One		2919	\$282.00		
0	Nonpriority Creditor's Name	Last 4 digits of account number		φ202.00		
	POB 3115	When was the debt incurred?	2019			
	Milwaukee, WI 53201 Number Street City State Zip Code	As of the data way file the elaims	e. Charle all that are by			
	Who incurred the debt? Check one.	As of the date you file, the claim i	s: Cneck all that apply			
	■ Debtor 1 only	Continuent				
	Debtor 2 only	☐ Contingent ☐ Unliquidated ☐ Disputed				
	Debtor 1 and Debtor 2 only					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured				
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	_	ration agreement or divorce that you did not			
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts			
	☐ Yes	■ Other. Specify credit card				
	30	- Other. Specify Strate Sala				

Schedule E/F: Creditors Who Have Unsecured Claims

Page 4 of 8

Lending Point LLC	Last 4 digits of account number	2919	\$9,365.0
Nonpriority Creditor's Name 1201 Roberts Blvd NW	When was the debt incurred?	2016	
Kennesaw, GA 30144 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
Debtor 1 only	Пол		
Debtor 2 only	☐ Contingent		
_	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured	l claim:	
At least one of the debtors and another	Student loans	r claiii.	
☐ Check if this claim is for a community debt Is the claim subject to offset?	_	ration agreement or divorce that you did not	
■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
Yes	Other. Specify loan		
Mariner Finance	Last A divite of account mounts	2919	\$6,540.0
Nonpriority Creditor's Name	Last 4 digits of account number		Ψ0,540.0
4150 Tuscarawas St W Canton, OH 44708	When was the debt incurred?	2018	
Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	l claim:	
Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
Yes	Other. Specify loan		
Summa Physicians Inc.	Last 4 digits of account number	2919	Unknow
Nonpriority Creditor's Name PO Box 76181	When was the debt incurred?	2021	
Cleveland, OH 44101-4755	_		
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	Disputed	l claim:	
At least one of the debtors and another	Type of NONPRIORITY unsecured ☐ Student loans	i Gianni:	
☐ Check if this claim is for a community debt Is the claim subject to offset?		ration agreement or divorce that you did not	
■ No	<u></u>	g plans, and other similar debts	
No.			

Schedule E/F: Creditors Who Have Unsecured Claims

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SYNCB/Amazon	Last 4 digits of account number	2919	\$958.0
Nonpriority Creditor's Name	Last 4 digits of account number		Ψσσσ.σ
PO BOX 965015 Orlando, FL 32896	When was the debt incurred?	2015	
Number Street City State Zip Code	As of the date you file, the claim i	is: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	■ Other. Specify credit card		
SYNCB/BP		2919	\$255.0
Nonpriority Creditor's Name	Last 4 digits of account number		\$355.0
POB 965024	When was the debt incurred?	2018	
Orlando, FL 32896			
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
Debtor 1 only	Constituent.		
Debtor 2 only	☐ Contingent ☐ Unliquidated		
	_ '		
☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt	Obligations arising out of a sepa	aration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	,	
No	Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	Other. Specify credit card		
SYNCB/MensWarehouse		2919	\$227.0
Nonpriority Creditor's Name	Last 4 digits of account number		ΨΖΖ1.0
POB 690061	When was the debt incurred?	2015	
Orlando, FL 32896 Number Street City State Zip Code	As of the date you file, the claim i	in Charle all that apply	
Who incurred the debt? Check one.	As of the date you me, the claim	в. Спеск ан тат арргу	
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharin	ng plans, and other similar debts	
□ Yes	■ Other Specify credit card		

Schedule E/F: Creditors Who Have Unsecured Claims

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Christopher Eric Reed		Case number (if known)	
SYNCB/PPC	Last 4 digits of account number	2919	\$2,58
Nonpriority Creditor's Name PO BOX 965005	When was the debt incurred?	2014	
Orlando, FL 32896 Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
Who incurred the debt? Check one.	,	on one and apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
Check if this claim is for a community	Student loans		
debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
□ Yes	Other. Specify credit card		
OVALOD/DDMO		2040	* 4.4
SYNCB/PPMC Nonpriority Creditor's Name	Last 4 digits of account number	2919	\$1,49
PO BOX 965024	When was the debt incurred?	2014	
Orlando, FL 32896 Number Street City State Zip Code	As of the date you file, the claim i	is: Check all that apply	
Who incurred the debt? Check one.	As of the date you me, the claim	s. Спеск ан так арру	
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
☐ Yes	Other. Specify credit card		
WEDILLADDO		2040	¢4.r
WFDILLARDS Nonpriority Creditor's Name	Last 4 digits of account number	2919	\$15
POB 14517	When was the debt incurred?	2014	
Des Moines, IA 50306		ion Charle all that are he	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt		ration agreement or divorce that you did not	
Is the claim subject to offset? ■ No	report as priority claims	a plane, and other similar debte	
☐ Yes	Other. Specify credit card		

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Part 4: Add the Amounts for Each Type of Unsecured Claim

Schedule E/F: Creditors Who Have Unsecured Claims

Page 7 of 8

Official Form 106 E/F

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
Total claims				
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 0.00
				Total Claim
Total	6f.	Student loans	6f.	\$ 0.00
claims from Part 2	0	Obligations original and of a compation arranged as discuss that		
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 37,480.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 37,480.00

Fill in this infor	mation to identify your	case:		
Debtor 1	Christopher Eric R	eed		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	AKRON		
Case number				Charle if this is an
(II KIIOWII)				☐ Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Tyes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company wit Name, Numb	h whom you have the er, Street, City, State and ZIP C	contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			
	City		State	ZIP Code	
2.2					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.3	- · · · · ·				
	Name				
	Number	Street			_
	City		State	ZIP Code	
2.4	-				
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.5					
	Name				_
	Number	Street			_
	City		State	ZIP Code	<u> </u>
	,				

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

Page 1 of 1

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Fill in this	information to identify your	case:		
Debtor 1	Christopher Eric F	Reed		
Dahtar 0	First Name	Middle Name	Last Name	
Debtor 2 (Spouse if, filing	ing) First Name	Middle Name	Last Name	
United Sta	ates Bankruptcy Court for the:	AKRON		
Case num (if known)	ber			☐ Check if this is an amended filing
Officia	l Form 106H			
	lule H: Your Cod	ebtors		12/15
fill it out, a your name		boxes on the left. Attac). Answer every question	h the Additional Page ton.	ion. If more space is needed, copy the Additional Page, o this page. On the top of any Additional Pages, write as a codebtor.
■ No				
■ No				
	hin the last 8 years, have you na, California, Idaho, Louisiana			y? (Community property states and territories include ngton, and Wisconsin.)
	. Go to line 3. s. Did your spouse, former spo	use, or legal equivalent liv	ve with you at the time?	
in line Form	e 2 again as a codebtor only	if that person is a guarai	ntor or cosigner. Make	if your spouse is filing with you. List the person shown sure you have listed the creditor on Schedule D (Official 6G). Use Schedule D, Schedule E/F, or Schedule G to fill
	Column 1: Your codebtor Name, Number, Street, City, State and Z	IP Code		Column 2: The creditor to whom you owe the debt Check all schedules that apply:
3.1	Name			☐ Schedule D, line ☐ Schedule E/F, line ☐ Schedule G, line
	Number Street City	State	ZIP Code	_
3.2	Name			☐ Schedule D, line ☐ Schedule E/F, line ☐ Schedule G, line ☐ Schedule
	Number Street City	State	ZIP Code	_

						_				
	in this information to identify your									
Del	btor 1 Christopher	Eric Reed			_					
	btor 2 buse, if filing)				_					
Uni	ited States Bankruptcy Court for the	e: AKRON			_					
	se number 		-					d filing ent showi	ng postpetition following date:	
0	fficial Form 106I						MM / DD/ Y	YYY		
S	chedule I: Your Inc	ome								12/15
sup spo atta	as complete and accurate as posplying correct information. If you use. If you are separated and yo ch a separate sheet to this form. The describe Employment	i are married and not fili ur spouse is not filing w On the top of any additi	ng jointly, and your ith you, do not inclu	spouse ide infor	is liv mati	ing wi	th you, included the your spoot out your spoot out the your spoot out	ude infor ouse. If m	mation about nore space is	your needed,
1.	Fill in your employment information.		Debtor 1		Debtor 2 or non-filing spouse					
;	If you have more than one job,	Employment status	■ Employed		☐ Employed					
	attach a separate page with information about additional	Employment status	☐ Not employed				☐ Not employed			
	employers.	Occupation	accountant							
	Include part-time, seasonal, or self-employed work.	Employer's name	The Ampersand	Group						
	Occupation may include student or homemaker, if it applies.	Employer's address	1946 South Arlir Akron, OH 4430		on					
		How long employed t	here? 1 mont	h			_			
Pai	rt 2: Give Details About Mo	nthly Income								
spoi	mate monthly income as of the ouse unless you are separated.	•							•	
•	ou or your non-filing spouse have me space, attach a separate sheet to		ombine the informatio	n for all o	empl	oyers f	or that perso	n on the	lines below. If y	you need
						For E	Debtor 1		ebtor 2 or ling spouse	
2.	List monthly gross wages, sald deductions). If not paid monthly,	•	, ,	2.	\$		4,334.00	\$	N/A	
3.	Estimate and list monthly over	time pay.		3.	+\$		0.00	+\$	N/A	
4.	Calculate gross Income. Add I	ne 2 + line 3.		4.	\$	4	,334.00	\$	N/A	

				For	Debtor 1		Debtor 2 or -filing spouse	
	Copy	y line 4 here	4.	\$	4,334.00	\$	N/A	
5.	List	all payroll deductions:						
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	929.00	\$	N/A	
	5b.	Mandatory contributions for retirement plans	5b.	\$	0.00	\$	N/A	
	5c.	Voluntary contributions for retirement plans	5c.	\$	0.00	\$	N/A	
	5d.	Required repayments of retirement fund loans	5d.	\$	0.00	\$	N/A	
	5e.	Insurance	5e.	\$	0.00	\$	N/A	
	5f.	Domestic support obligations	5f.	\$	0.00	\$	N/A	
	5g.	Union dues	5g.	\$	0.00	\$	N/A	
	5h.	Other deductions. Specify:	_ 5h.+	\$	0.00	+ \$	N/A	
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$_	929.00	\$	N/A	
7.	Calc	ulate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	3,405.00	\$	N/A	
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$	0.00	\$	N/A	
	8b.	Interest and dividends	8b.	\$	0.00	\$	N/A	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$	0.00	\$	N/A	
	8d.	Unemployment compensation	8d.	\$_	0.00	<u>\$</u> —	N/A	
	8e.	Social Security	8e.	\$_	0.00	\$	N/A	
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:		\$	0.00	\$	N/A	
	8g.	Pension or retirement income	 8g.	\$	0.00	\$	N/A	
	8h.	Other monthly income. Specify:	_ 8h.+	\$	0.00	+ \$	N/A	
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	0.00	\$	N/A	
10.	Calc	ulate monthly income. Add line 7 + line 9.	10. \$:	3,405.00 + \$		N/A = \$ 3,405.00	
		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	,		-			
11.	State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. +\$ 0.00							
12.		the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certaines					12. \$ 3,405.00 Combined	
13.	Do y	ou expect an increase or decrease within the year after you file this form'	?				monthly income	
	Yes. Explain: no expected changes within the year following the filing of this case.							

Official Form 106l Schedule I: Your Income page 2

Fill	in this informa	tion to identify yo	our case:					
Deb	otor 1	Christopher E	Eric Reed			Chec	ck if this is:	
Dah	otor 2					_	An amended filing	
	ouse, if filing)						13 expenses as of	ving postpetition chapter the following date:
Unit	ted States Bankr	uptcy Court for the	: AKRON	l .		-	MM / DD / YYYY	
	se number							
(If k	nown)							
0	fficial Fo	rm 106J				_		
S	chedule	J: Your	Exper	ises				12/15
Be info	as complete a	and accurate as	possible.	If two married people ch another sheet to the				
Par 1.	t 1: Descr Is this a joir	ibe Your House	hold					
١.	No. Go to							
			in a separ	ate household?				
	□ N □ Y	-	st file Offici	al Form 106J-2, <i>Expen</i>	ses for Separate Hous	<i>ehold</i> of Deb	otor 2.	
2.	Do you have	e dependents?	■ No					
	Do not list Do Debtor 2.	ebtor 1 and	☐ Yes.	Fill out this information for each dependent	•		Dependent's age	Does dependent live with you?
	Do not state dependents							□ No □ Yes
	acpendents	names.					_	□ No
								☐ Yes
								□ No
								☐ Yes ☐ No
								□ No □ Yes
3.	expenses of	oenses include f people other t d your depende	han $_{m \Box}$	No Yes				163
Par	t 2: Estim	ate Your Ongoi	na Monthi	v Expenses				
exp	imate your ex senses as of a plicable date.	penses as of your date after the	our bankri bankruptc	uptcy filing date unles y is filed. If this is a s	ss you are using this upplemental <i>Schedul</i>	form as a su e <i>J</i> , check th	ipplement in a Cha ne box at the top o	apter 13 case to report f the form and fill in the
				government assistan				
	ficial Form 10		d have inc	luded it on Schedule	I: Your Income		Your expe	enses
4.		or home owners and any rent for th		ses for your residenc r lot.	e. Include first mortgag	ge 4. \$.	675.00
	If not includ	led in line 4:						
	4a. Real e	estate taxes				4a. \$	\$	0.00
	•	rty, homeowner's				4b. \$		0.00
				ipkeep expenses		4c. \$		0.00
5.		owner's associat		dominium dues our residence, such as	homo oquity loons	4d. \$ 5. \$		0.00
J.	Auditional	nongaye paym	cina ioi yo	on residence, Such as	Home equity loans	J. 4	ν	0.00

Fill in this inf	ormation to identify you	r case:		
Debtor 1	Christopher Eric	Reed		
	First Name	Middle Name	Last Name	
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name	
United States	Bankruptcy Court for the:	AKRON		
Case number (if known)				☐ Check if this is an amended filing
	orm 106Dec ation About	an Individual	Debtor's Sch	edules 12/15
	. 18 U.S.C. §§ 152, 1341, sign Below	10.0, 4.1.4 00, 11		
Did you	pay or agree to pay som	eone who is NOT an attor	ney to help you fill out banl	cruptcy forms?
■ No				
☐ Yes	. Name of person			Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119)
	nalty of perjury, I declar are true and correct.	e that I have read the sum	mary and schedules filed w	ith this declaration and
X /s/ C	hristopher Eric Reed		X	
Chris	stopher Eric Reed ature of Debtor 1		Signature of Del	otor 2
Date	May 3, 2021		Date	

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

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Best Case Bankruptcy

Fill	in this inforn	nation to identify you	r case:			
Deb	tor 1	Christopher Eric I	Reed			
Date	t 0	First Name	Middle Name	Last Name		
	tor 2 use if, filing)	First Name	Middle Name	Last Name		
Unit	ed States Ba	nkruptcy Court for the:	AKRON			
Can	e number					
(if kno						heck if this is an
					ar	nended filing
∩ff	icial Fo	rm 107				
			Affairs for Individ	luals Filing for B	ankruntov	4/19
infor	mation. If m	ore space is needed,	attach a separate sheet to		equally responsible for supp additional pages, write you	
num	ber (if know	n). Answer every que	stion.			
Part	Give D	Details About Your Ma	arital Status and Where You	Lived Before		
1.	What is you	r current marital statu	ıs?			
	☐ Married					
	■ Not mar	rried				
2.	During the la	ast 3 years, have you	lived anywhere other than	where you live now?		
	-					
	■ No □ Yes. Lis	st all of the places you I	lived in the last 3 years. Do no	ot include where you live now	'.	
	Debtor 1 Pr	ior Address:	Dates Debtor 1	Debtor 2 Prior Ad	dress:	Dates Debtor 2
			lived there			lived there
					ity property state or territory	
state	s and territori	ies include Arizona, Ca	ilifornia, idano, Louisiana, Nev	vada, New Mexico, Puerto Ri	co, Texas, Washington and Wi	sconsin.)
	■ No					
	☐ Yes. Ma	ake sure you fill out <i>Scl</i>	hedule H: Your Codebtors (Of	fficial Form 106H).		
Part	2 Explai	in the Sources of You	ır Income			
4.	Did you have	e any income from en	mployment or from operatin	a a husiness during this ve	ear or the two previous calen	dar voars?
	Fill in the tota	al amount of income yo	ou received from all jobs and a have income that you receive	all businesses, including part-	time activities.	uai years:
	□ No					
	_	I in the details.				
		in the details.				
			Debtor 1	One are in a service	Debtor 2	Onese luc suss
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		of current year until d for bankruptcy:	■ Wages, commissions, bonuses, tips	\$11,769.00	☐ Wages, commissions, bonuses, tips	
			☐ Operating a business		☐ Operating a business	

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 1

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Deb				Debtor 1	ebtor 1			Debtor 2		
				Sources of income Check all that apply.	(befo	ss income ore deductions and usions)	Sources of ind Check all that a		Gross income (before deductions and exclusions)	
			■ Wages, commissions, bonuses, tips		\$48,575.00	☐ Wages, con bonuses, tips	nmissions,			
				☐ Operating a business			☐ Operating a	business		
For the calendar year before that: (January 1 to December 31, 2019)				■ Wages, commissions, bonuses, tips			☐ Wages, commissions, bonuses, tips			
				☐ Operating a business			Operating a	business		
	and other winnings. List each	public bene If you are fil	fit payments; ing a joint cas the gross inco	ner that income is taxable. Exa pensions; rental income; interse se and you have income that your me from each source separa	rest; divi you rece	dends; money colle eived together, list it	cted from lawsuits; only once under D	royalties; an ebtor 1.	ecurity, unemployment, d gambling and lottery	
				D-1-14			Dalita a O			
	Debtor 1 Debto Sources of income Gross income from Source							como	Gross income	
				Describe below.	each (befo	s income from source ore deductions and usions)	Sources of inc Describe below		(before deductions and exclusions)	
Pa	rt 3: Lis	t Certain Pa	yments You	Made Before You Filed for	Bankru	ptcy				
6.	Are eithe ☐ No.	Neither De individual	ebtor 1 nor E orimarily for a	's debts primarily consumer Debtor 2 has primarily consumer personal, family, or househol ore you filed for bankruptcy, di	umer de ld purpo	e bts. Consumer deb se."		· ·	1(8) as "incurred by an	
□ No. Go to line 7.										
☐ Yes List below each creditor to whom you paid a total of \$6,825* or more in one or more payments ar paid that creditor. Do not include payments for domestic support obligations, such as child support not include payments to an attorney for this bankruptcy case.										
* Subject to adjustment on 4/01/22 and every 3 years after that for cases filed on or after the date of adjustment.										
Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?										
		■ No.	Go to line 7	7.						
		□ _{Yes}	include pay	each creditor to whom you pai rments for domestic support o this bankruptcy case.						
	Creditor	's Name and	d Address	Dates of payme	ent	Total amount	Amount you	Was this	payment for	
						paid	still owe			

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 2

υe	otor 1 Christopher Eric Reed		Cas	se number (if known)								
7.	Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony.											
	NoYes. List all payments to an insider.											
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for t	this payment						
8.	Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider.											
	No☐ Yes. List all payments to an insider											
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for t	this payment						
Dа	rt 4: Identify Legal Actions, Repossessio	ne and Foreclosures	paid	Still Owe	morade credi	tor 3 name						
9.	Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. No Yes, Fill in the details.											
	Case title Case number	Nature of the case	Court or agency	rt or agency		Status of the case						
10.	Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below.											
	No. Go to line 11.Yes. Fill in the information below.											
	Creditor Name and Address	Describe the Property	Date	Date Value of prop								
		Explain what happene	d									
11.	Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? No Yes. Fill in the details.											
	Creditor Name and Address	Describe the action th	e creditor took	Date taker	action was	Amount						
12.	Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?											
	■ No □ Yes											
Pa	rt 5: List Certain Gifts and Contributions											
13.	Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? ■ No □ Yes. Fill in the details for each gift.											
	Gifts with a total value of more than \$600 per person	Describe the gifts	Describe the gifts		s you gave ifts	Value						
	Person to Whom You Gave the Gift and Address:											

Statement of Financial Affairs for Individuals Filing for Bankruptcy

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П

Address

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Description and value of

property transferred

Describe any property or

paid in exchange

payments received or debts

page 4

Yes. Fill in the details. Person Who Received Transfer

Person's relationship to you

Date transfer was

made

19.	9. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.) No Yes. Fill in the details. Name of trust Description and value of the property transferred Date Transfer was							
	Name of trust	Description and va	alue of the proper	ty transferred	Date Transfer was made			
Par	Es: List of Certain Financial Accounts, Instru	uments, Safe Deposit	Boxes, and Stora	ge Units				
7								
		ast 4 digits of ccount number	Type of account instrument	or Date account was closed, sold, moved, or transferred	Last balance before closing or transfer			
21.	Do you now have, or did you have within 1 year cash, or other valuables?	ar before you filed for	bankruptcy, any s	safe deposit box or other deposit	ory for securities,			
	NoYes. Fill in the details.							
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)		Who else had access to it? Address (Number, Street, City, State and ZIP Code)		Do you still have it?			
22.	Have you stored property in a storage unit or	place other than your	home within 1 yea	ar before you filed for bankruptc	y?			
	■ No □ Yes. Fill in the details.							
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or h to it? Address (Number, St State and ZIP Code)		escribe the contents	Do you still have it?			
Par	9: Identify Property You Hold or Control for	r Someone Else						
23.	Do you hold or control any property that some for someone.	eone else owns? Inclu	de any property y	ou borrowed from, are storing fo	or, or hold in trust			
	■ No □ Yes. Fill in the details.							
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the prope (Number, Street, City, St Code)		escribe the property	Value			
Par	10: Give Details About Environmental Inform	nation						
For	he purpose of Part 10, the following definition:	s apply:						
	Environmental law means any federal, state, o toxic substances, wastes, or material into the regulations controlling the cleanup of these si	air, land, soil, surface	water, groundwa					
	Site means any location, facility, or property at to own, operate, or utilize it, including disposa	s defined under any e		, whether you now own, operate,	or utilize it or used			
	Hazardous material means anything an enviro hazardous material, pollutant, contaminant, or		s a hazardous wa	aste, hazardous substance, toxic	substance,			
Rep	ort all notices, releases, and proceedings that y	you know about, rega	rdless of when the	ey occurred.				

Official Form 107

page 5

Statement of Financial Affairs for Individuals Filing for Bankruptcy

24.	Has	any governmental unit notified you that	you may be liable or potentially liable	under or in violation of an environm	ental law?					
		No Yes. Fill in the details.								
		me of site dress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice					
25.	Hav	e you notified any governmental unit of	any release of hazardous material?							
		No Yes. Fill in the details.								
		me of site dress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice					
26.	Hav	e you been a party in any judicial or adn	ninistrative proceeding under any envi	ronmental law? Include settlements	and orders.					
		No Yes. Fill in the details.								
		se Title se Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case					
Par	t 11:	Give Details About Your Business or	,							
27.	With	nin 4 years before you filed for bankrupt	cy, did you own a business or have an	y of the following connections to any	/ business?					
		☐ A sole proprietor or self-employed in	n a trade, profession, or other activity,	either full-time or part-time						
		☐ A member of a limited liability comp	any (LLC) or limited liability partnersh	ip (LLP)						
		☐ A partner in a partnership								
		☐ An officer, director, or managing exc	ecutive of a corporation							
		☐ An owner of at least 5% of the voting or equity securities of a corporation								
		No. None of the above applies. Go to Part 12.								
		Yes. Check all that apply above and fill	in the details below for each business	3.						
		siness Name	Describe the nature of the business	Employer Identification numbe						
		dress nber, Street, City, State and ZIP Code)	Name of accountant or bookkeeper	Do not include Social Security Dates business existed	number or ITIN.					
28.		nin 2 years before you filed for bankrupt itutions, creditors, or other parties.	cy, did you give a financial statement (to anyone about your business? Incl	ude all financial					
		No Yes. Fill in the details below.								
		me dress nber, Street, City, State and ZIP Code)	Date Issued							

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 6

Debtor 1 Christopher Eric Reed		Case number (if known)
Part 12: Sign Below		
have read the answers on this Statem are true and correct. I understand that with a bankruptcy case can result in fir	making a false statement, concealing propert nes up to \$250,000, or imprisonment for up to	y, or obtaining money or property by fraud in connection
/s/ Christopher Eric Reed		
Christopher Eric Reed Signature of Debtor 1	Signature of Debtor 2	
Date May 3, 2021	Date	
Christopher Eric Reed Signature of Debtor 2 Signature of Debtor 1		
	who is not an attorney to help you fill out banl	cruptcy forms?
No		

☐ Yes. Name of Person _____. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 7

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Best Case Bankruptcy

Fill in this information to identify your case:							
Debtor 1	hristopher Eric Reed						
Debtor 2 (Spouse, if filing)							
United States B	ankruptcy Court for the: AKRON						
Case number (if known)							

Check	as directed in lines 17 and 21:							
According to the calculations required by this Statement:								
1. Disposable income is not determined un11 U.S.C. § 1325(b)(3).								
	2. Disposable income is determined under 11 U.S.C. § 1325(b)(3).							
	3. The commitment period is 3 years.							
	4. The commitment period is 5 years.							

☐ Check if this is an amended filing

Official Form 122C-1

Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

04/20

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

Part	1:	Calculate Your Average Monthly Income							
1.	What	is your marital and filing status? Check one of	only.						
	■ No	ot married. Fill out Column A, lines 2-11.							
	□ Ma	arried. Fill out both Columns A and B, lines 2-11							
10 th	01(10A) e 6 mo	e average monthly income that you received from al b. For example, if you are filing on September 15, the 6- nths, add the income for all 6 months and divide the tota own the same rental property, put the income from that	month period wo al by 6. Fill in the	uld be Ma result. Do	rch 1 thro	ugh Aug de any ir	ust 31. If the amo	ount of your monthly incomore than once. For examp	ne varied during le, if both
						Colum Debto		Column B Debtor 2 or non-filing spouse	
2.		gross wages, salary, tips, bonuses, overtime ll deductions).	, and commis	sions (b	efore all	\$	4,334.00	\$	
3.		ony and maintenance payments. Do not includinn B is filled in.	e payments fro	om a spo	use if	\$	0.00	\$	
4.	of yo from a	mounts from any source which are regularly puor your dependents, including child supportan unmarried partner, members of your househo commates. Do not include payments from a spousted on line 3.	t. Include reguld, your deper	ılar contri dents, pa	ibutions arents,	\$	0.00	\$	
5.		ncome from operating a business, ession, or farm	Debtor 1						
	Gross	s receipts (before all deductions)	\$0.0						
	Ordin	ary and necessary operating expenses	- \$0.0	_					
	Net m	nonthly income from a business, profession, or fa	rm \$0.0	0 Copy	/ here ->	\$	0.00	\$	
6.	Net i	ncome from rental and other real property	Debtor 1						
	Gross	s receipts (before all deductions)	\$ 0.0						
	Ordin	ary and necessary operating expenses	- \$ 0.0	0					

Official Form 122C-1 Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

page 1

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Net monthly income from rental or other real property

Best Case Bankruptcy

0.00 **Copy here ->**\$

0.00

Debtor 1	Christopher Eric Reed		Case number	(if know	n)		
			Column A Debtor 1		Column B Debtor 2 non-filing	or	
7. Int	terest, dividends, and royalties		\$	0.00	\$		
	nemployment compensation		\$	0.00) \$		
the	o not enter the amount if you contend that the amount received was a benefit u e Social Security Act. Instead, list it here: For you \$ 0.00	nder					
	For your spouse \$						
9. Pe be no Un dis pa	ension or retirement income. Do not include any amount received that was a enefit under the Social Security Act. Also, except as stated in the next sentence of include any compensation, pension, pay, annuity, or allowance paid by the inited States Government in connection with a disability, combat-related injury of sability, or death of a member of the uniformed services. If you received any reapy paid under chapter 61 of title 10, then include that pay only to the extent that does not exceed the amount of retired pay to which you would otherwise be entitive tretired under any provision of title 10 other than chapter 61 of that title.	e, do or tired it	\$	0.00) \$		
10. Ind Do und col crit col Go de	come from all other sources not listed above. Specify the source and amout on not include any benefits received under the Social Security Act; payments mander the Federal law relating to the national emergency declared by the Preside order the National Emergencies Act (50 U.S.C. 1601 et seq.) with respect to the pronavirus disease 2019 (COVID-19); payments received as a victim of a war time, a crime against humanity, or international or domestic terrorism; or compensation, pension, pay, annuity, or allowance paid by the United States overnment in connection with a disability, combat-related injury or disability, or eath of a member of the uniformed services. If necessary, list other sources on exparate page and put the total below.	ade ent					
			\$	0.00) \$		
		-	\$	0.00) \$		
	Total amounts from separate pages, if any.	+	\$	0.00) \$		
	alculate your total average monthly income. Add lines 2 through 10 for ach column. Then add the total for Column A to the total for Column B. Determine How to Measure Your Deductions from Income		4,334.00	+ \$			4,334.00 tal average onthly income
	opy your total average monthly income from line 11					\$	4,334.00
_	_						
	You are married and your spouse is not filing with you. Fill in the amount of the income listed in line 11, Column B, that was NOT redependents, such as payment of the spouse's tax liability or the spouse's subselow, specify the basis for excluding this income and the amount of income	ıppor	t of someone	e other	than you or yo	ur depend	ents.
	adjustments on a separate page. If this adjustment does not apply, enter 0 below.						
	•	\$					
		\$		_			
	+	\$		_			
	Total \$		0.00	<u>c</u>	Copy here=>		0.00
14. Y	Your current monthly income. Subtract line 13 from line 12.					\$	4,334.00
15. C	Calculate your current monthly income for the year. Follow these steps:						
	15a. Copy line 14 here=>					\$	4,334.00

Official Form 122C-1 Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

page 2

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Best Case Bankruptcy

Debtor 1	Christopher Eric Reed	Case number (if known)		
	Multiply line 15a by 12 (the number of months in a year).		X	12
15k	. The result is your current monthly income for the year for this part of the for	m	\$	52,008.00

Debto	r 1	Chi	istopher Eric Reed		Case number (<i>if known</i>)		
16.	Cald	culat	e the median family income that applies to y	ou. Follow these st	teps:		
	16a	. Fill i	n the state in which you live.	ОН	-		
	16b.	. Fill i	n the number of people in your household.	1	_		
	16c.	To f	n the median family income for your state and s ind a list of applicable median income amounts ructions for this form. This list may also be avail	, go online using the		\$_	51,776.00
17.	Hov	v do	the lines compare?				
	17a.	. [Line 15b is less than or equal to line 16c. O 11 U.S.C. § 1325(b)(3). Go to Part 3. Do N				
	17b.	•	Line 15b is more than line 16c. On the top of 1325(b)(3). Go to Part 3 and fill out Calcu your current monthly income from line 14 al	lation of Your Dis			
Part	3:	C	alculate Your Commitment Period Under 11 U	U.S.C. § 1325(b)(4))		
18.	Сор	у уо	ur total average monthly income from line 1	1.		\$	4,334.00
	cont spot	end use's	he marital adjustment if it applies. If you are that calculating the commitment period under 1 income, copy the amount from line 13.	married, your spou 1 U.S.C. § 1325(b)(se is not filing with you, and you		0.00
	19a.	. If th	e marital adjustment does not apply, fill in 0 on	line 19a.		- \$	0.00
	19b.	Sub	stract line 19a from line 18.			\$	4,334.00
20.	Cald	culat	e your current monthly income for the year.	Follow these steps	s:		
	20a	Cop	y line 19b			\$_	4,334.00
		Mul	tiply by 12 (the number of months in a year).				x 12
	20b.	. The	result is your current monthly income for the ye	ear for this part of th	ne form	\$_	52,008.00
	20c.	Сор	y the median family income for your state and s	size of household fr	om line 16c	\$_	51,776.00
	21.	Hov	v do the lines compare?				
			Line 20b is less than line 20c. Unless otherwis period is 3 years. Go to Part 4.	se ordered by the co	ourt, on the top of page 1 of this form, chec	k box 3,	The commitment
			Line 20b is more than or equal to line 20c. Uncommitment period is 5 years. Go to Part 4.	less otherwise orde	ered by the court, on the top of page 1 of the	is form, c	heck box 4, The

Part 4: Sign Below

By signing here, under penalty of perjury I declare that the information on this statement and in any attachments is true and correct.

\mathbf{X} /s/ Christopher Eric Reed

Christopher Eric Reed Signature of Debtor 1

Date May 3, 2021

MM / DD / YYYY

If you checked 17a, do NOT fill out or file Form 122C-2.

If you checked 17b, fill out Form 122C-2 and file it with this form. On line 39 of that form, copy your current monthly income from line 14 above.

Fill in this info	ormation to identify your case:			
Debtor 1	Christopher Eric Reed			
Dobtor 2		-		
Debtor 2 (Spouse, if filin	a)	-		
	. ,			
United States I	Bankruptcy Court for the: AKRON	-		
Case number (if known)		☐ Check	if this is an amended	filing
Official Form 1		I		
Cnapter	13 Calculation of Your Disposable	income		04/19
	form, you will need your completed copy of <i>Chapter 13 States</i> Period (Official Form 122C-1).	ment of Your Current Monthly	Income and Calculation	n of
space is neede	e and accurate as possible. If two married people are filing to ed, attach a separate sheet to this form, Include the line numbes, write your name and case number (if known).			
Part 1: Ca	Iculate Your Deductions from Your Income			
the questio	I Revenue Service (IRS) issues National and Local Standards ns in lines 6-15. To find the IRS standards, go online using th may also be available at the bankruptcy clerk's office.			
expenses if	expense amounts set out in lines 6-15 regardless of your actual exthey are higher than the standards. Do not include any operating of do not deduct any amounts that you subtracted from your spous	expenses that you subtracted fro	m income in lines 5 and	
If your expe	nses differ from month to month, enter the average expense.			
Note: Line n	umbers 1-4 are not used in this form. These numbers apply to info	ormation required by a similar fo	rm used in chapter 7 case	es.
5. The ทเ	mber of people used in determining your deductions from inc	come		
plus the	ne number of people who could be claimed as exemptions on your e number of any additional dependents whom you support. This number of people in your household.		1	
National St	andards You must use the IRS National Standards to an	swer the questions in lines 6-7.		
	clothing, and other items: Using the number of people you enter rds, fill in the dollar amount for food, clothing, and other items.	ed in line 5 and the IRS Nationa	s	715.00
the dol people	-pocket health care allowance: Using the number of people you ar amount for out-of-pocket health care. The number of people is who are 65 or olderbecause older people have a higher IRS allothan this IRS amount, you may deduct the additional amount on li	split into two categoriespeople wance for health car costs. If yo	who are under 65 and	

Chapter 13 Calculation of Your Disposable Income

page 1

	microphici Elle Reed		odoc namber (ii itrioii	
People v	who are under 65 years of age			
7a.	Out-of-pocket health care allowance per person	\$56		
7b.	Number of people who are under 65	X1_		
7c.	Subtotal. Multiply line 7a by line 7b.	\$ 56.00	Copy here=>	\$56.00
eople v	who are 65 years of age or older			
7d.	Out-of-pocket health care allowance per person	\$ 125		
7e.	Number of people who are 65 or older	X 0		
7f.	Subtotal. Multiply line 7d by line 7e.	\$0.00_	Copy here=>	\$0.00_
7g.	Total. Add line 7c and line 7f	\$	56.00	Copy total here=> \$56.0
eparate	rer the questions in lines 8-9, use the U.S. Truste instructions for this form. This chart may also busing and utilities - Insurance and operating expone dollar amount listed for your county for insurance	e available at the bankrenses: Using the number	uptcy clerk's office. of people you entere	
. Hou	using and utilities - Mortgage or rent expenses:			
9a.	Using the number of people you entered in line 5, the listed for your county for mortgage or rent expense			\$823.00
9b.	Total average monthly payment for all mortgages at To calculate the total average monthly payment, accontractually due to each secured creditor in the 60 for bankruptcy. Next divide by 60.	dd all amounts that are	y your home.	
	Name of the creditor	Average monthly payment		
	-NONE-	\$		
	9b. Total average monthly paymen	nt \$ 0.0	Copy	0.00 Repeat this amo

9c. Net mortgage or rent expense.

Subtract line 9b (total average monthly payment) from line 9a (mortgage or rent expense). If this number is less than \$0, enter \$0.

9b. Total average monthly payment

Сору 823.00 823.00 here=>

10. If you claim that the U.S. Trustee Program's division of the IRS Local Standard for housing is incorrect and affects the calculation of your monthly expenses, fill in any additional amount you claim.

0.00

on line 33a.

Explain why:

otor 1	Christ	topher Eric Reed			Case numb	er (<i>if known</i>)		
11.	Local tra	ansportation expenses: Check the number of ve	hicles for whic	h you claim	an owners	ship or operatin	g expense.	
	□ 0. Go	to line 14.						
	■ 1. Go	to line 12.						
	□ 2 or m	nore. Go to line 12.						
12.		operation expense: Using the IRS Local Standar g expenses, fill in the <i>Operating Costs</i> that apply for						188.00
13.	You may	ownership or lease expense: Using the IRS Loo not claim the expense if you do not make any loa n two vehicles.						
Vel	nicle 1	Describe Vehicle 1: 2020 Cadillac CT5 950	00 miles Goo	d condition	. LEASE			
13a.	Ownersh	ip or leasing costs using IRS Local Standard			\$	521.00		
		monthly payment for all debts secured by Vehicle			_			
	Do not in	clude costs for leased vehicles.						
	are contr	ate the average monthly payment here and on lin actually due to each secured creditor in the 60 mood. Then divide by 60.			t			
	Nan	ne of each creditor for Vehicle 1	Average r payment	nonthly				
	GM	l Financial	\$	776.00				
		Total Average Monthly Payment	\$	776.00	Copy here =>	-\$77	Repeat this amount on line 33b.	
3с.	Net Vehi	cle 1 ownership or lease expense					Copy net Vehicle 1	
	Subtract	line 13b from line 13a. if this number is less than	\$0, enter \$0		. \$_	0.00	expense here => \$	0.00
Vel	nicle 2	Describe Vehicle 2:						
3d.	Ownersh	ip or leasing costs using IRS Local Standard			\$	0.00		
13e.	Average leased ve	monthly payment for all debts secured by Vehicle ehicles.	2. Do not inclu	ude costs for	r			
	Nan	ne of each creditor for Vehicle 2	Average r payment	monthly				
			\$					
		Total average monthly payment	\$		Copy here => -\$	0.0	Repeat this amount on line 33c.	
	NI - () / - I- !	cle 2 ownership or lease expense			_		Copy net	

14. Public transportation expense: If you claimed 0 vehicles in line 11, using the IRS Local Standards, fill in the

15. Additional public transportation expense: If you claimed 1 or more vehicles in line 11 and if you claim that you may also deduct a public transportation expense, you may fill in what you believe is the appropriate expense, but you may not claim more than the IRS Local Standard for *Public Transportation*.

Public Transportation expense allowance regardless of whether you use public transportation.

0.00

0.00

Oth	er Necessary E	•	addition to the expense following IRS categorie		listed above,	you are allowed your monthly expenses	s for	
16.	self-employment your pay for the and subtract the	nt taxes, social see taxes. Howe at number from	security taxes, and Med ever, if you expect to rec the total monthly amour	icare taxes. eive a tax r	You may incl efund, you mu	d local taxes, such as income taxes, lude the monthly amount withheld from ust divide the expected refund by 12 for taxes.	c	929.00
	Do not include real estate, sales, or use taxes.					\$	923.00	
17.	Involuntary deductions: The total monthly payroll deductions that your job requires, such as retirement contributions, union dues, and uniform costs.				•	0.00		
	Do not include	amounts that ar	e not required by your jo	ob, such as	voluntary 401	(k) contributions or payroll savings.	\$	0.00
18.	Life Insurance: The total monthly premiums that you pay for your own term life insurance. If two married people are filing together, include payments that you make for your spouse's term life insurance. Do not include premiums for life insurance on your dependents, for a non-filing spouse's life insurance, or for any form of life insurance other than term.					\$	0.00	
19.	 Court-ordered payments: The total monthly amount that you pay as required by the order of a court or administrative agency, such as spousal or child support payments. 						\$	0.00
			-			ou will list these obligations in line 35.	Ψ	0.00
20.		,	amount that you pay for	education t	that is either re	equired:		
	as a condition						_	0.00
	for your phy	sically or menta	lly challenged depender	nt child if no	public educa	ation is available for similar services.	\$	0.00
21.			mount that you pay for only elementary or second			itting, daycare, nursery, and preschool.	\$	0.00
22.	2. Additional health care expenses, excluding insurance costs: The monthly amount that you pay for health care that is required for the health and welfare of you or your dependents and that is not reimbursed by insurance or paid by a health savings account. Include only the amount that is more than the total entered in line 7. Payments for health insurance or health savings accounts should be listed only in line 25.					\$	0.00	
22	•		· ·		•		· —	
20.	23. Optional telephone and telephone services: The total monthly amount that you pay for telecommunication services for you and your dependents, such as pagers, call waiting, caller identification, special long distance, or business cell phone service, to the extent necessary for your health and welfare or that of your dependents or for the production of income, if it is not reimbursed by your employer. Do not include payments for basic home telephone, internet and cell phone service. Do not include self-employment expenses, such as those reported on line 5 of Official Form 122C-1, or any amount you previously deducted.						+\$	0.00
24.			ved under the IRS exp	ense allow	ances.		\$	3,203.00
A ala	Add lines 6 thro		There are additional	al a al at: a . a a	مالم منظ المستوالم	- Manage Tank		
Add	litional Expense	Deductions	These are additional Note: Do not include					
25.		bility insurance,				ses. The monthly expenses for health y necessary for yourself, your spouse, o	or	
	Health insurance	e		\$	0.00			
	Disability insura	ince		\$	0.00			
	Health savings	account		+\$	0.00			
	Total			\$	0.00	Copy total here=>	\$	0.00
	Do you actually	•	I amount? actually spend?					
	■ Yes	, 54		\$				
26.	Continued cor continue to pay your household	for the reasona or member of y	able and necessary care	or family me and support	ort of an elderl e to pay for su	actual monthly expenses that you will y, chronically ill, or disabled member of uch expenses. These expenses may 29A(b)	\$	0.00
27.						nses that you incur to maintain the es Act or other federal laws that apply.		
		,	e nature of these expens				\$	0.00

Debtor 1	Christopher Eric Reed	Cas	se number (if kr	nown)					
	Additional home energy costs. Your hom- line 8.	e energy costs are included in your insurance	e and opera	iting e	expense	es on			
	If you believe that you have home energy costs that are more than the home energy costs included in expenses on lir 8, then fill in the excess amount of home energy costs								
	You must give your case trustee documenta amount claimed is reasonable and necessa	ation of your actual expenses, and you must ry.	show that th	ne add	ditional		\$		0.00
		ren who are younger than 18. The monthly pendent children who are younger than 18 ye							
	You must give your case trustee documenta claimed is reasonable and necessary and n	ation of your actual expenses, and you must ot already accounted for in lines 6-23.	explain why	the a	amount				
	* Subject to adjustment on 4/01/22, and every 3 years after that for cases begun on or after the date of adjustment.					\$		0.00	
	Additional food and clothing expense. The monthly amount by which your actual food and clothing expenses are higher than the combined food and clothing allowances in the IRS National Standards. That amount cannot be more than 5% of the food and clothing allowances in the IRS National Standards.								
	To find a chart showing the maximum additional allowance, go online using the link specified in the separate instructions for this form. This chart may also be available at the bankruptcy clerk's office.								
	You must show that the additional amount of	laimed is reasonable and necessary.					\$		0.00
	. Continuing charitable contributions. The amount that you will continue to contribute in the form of cash or financial instruments to a religious or charitable organization. 11 U.S.C. § 548(d)(3) and (4).								
	Do not include any amount more than 15% of your gross monthly income.					\$		0.00	
	32. Add all of the additional expense deductions. Add lines 25 through 31.					\$_		0.00	
Ded	uctions for Debt Payment								
33. F	-	n property that you own, including home	mortgages	, veh	icle				
Т		ent, add all amounts that are contractually du	ie to each s	ecure	ed				
	Mortgages on your home	,					Aver	age mo	onthly
33a.	Copy line 9b here					=>	\$		0.00
	Loans on your first two vehicles								
33b.	Copy line 13b here					=>	\$	7	76.00
33c.						=>	\$		0.00
33d.	List other secured debts:								
	e of each creditor for other secured debt	Identify property that secures the debt		inclu or in	s paym ude tax usuranc	es			
					No				
	-NONE-				Yes		\$		
					No				
					Yes		\$		
							Ψ		
					No				
					Yes	+	\$		
33e	Total average monthly payment. Add lines	33a through 33d	\$	776	6.00	Copy total here=			776.00

	otoprior Eno recou			Ouse	namber (# www.)			
		e 33 secured by your prima our support or the support						
■ No.	Go to line 35.							
☐ Yes.	State any amount that you listed in line 33, to keep po Next, divide by 60 and fill it	must pay to a creditor, in adossession of your property (con the information below.	dition to the alled the <i>cu</i>	e payments ure amount).				
Name of the	creditor	Identify property that secur	es the debt		Total cure amou	nt	Monthly o	cure
-NONE-				\$		÷ 60 =		
						Co	рру	
				Total	\$	ייו אחר ב	tal ere=> \$	0.00
35. Do you	owe any priority claims - s	uch as a priority tax, child	support, o	r alimony - th	at			
are past	due as of the filing date o	f your bankruptcy case? 11	U.S.C. § 5	507.				
_	Go to line 36.							
☐ Yes.		Il of these priority claims. Do ch as those you listed in line		e current or				
		lue priority claims			\$	0.00 ÷	60 \$	0.00
36. Projecte	ed monthly Chapter 13 plar			;	\$			
Office of	the United States Courts (fo	stated on the list issued by the or districts in Alabama and No s Trustees (for all other distri	orth Carolin	a) or by	<			
To find a l	list of district multipliers that inclu	udes your district, go online using t may also be available at the ba	thé link spe			-		
·		•	intruptey elei	K3 office.			total	
Average	monthly administrative expe	ense			\$	nere:	=> \$	
37 Add all	l of the deductions for deb	t navment					\$	776.00
	es 33e through 36.	t paymona						
Total Deduc	ctions from Income							
38. Add all	of the allowed deductions.							
	ne 24, All of the expenses alle allowances		\$	3,203.00	_			
Copy lii	ne 32, All of the additional ex	xpense deductions	\$	0.00	_			
Copy li	ne 37, All of the deductions t	for debt payment	+\$	776.00	- -			
Total de	eductions		\$	3,979.00	Copy total h	ere=>	\$	3,979.00

Part 2:	Determine You	ır Disposable Income Under 11 U	J.S.C. § 1325(b)	(2)				
		rent monthly income from line 14 Current Monthly Income and Calo			ł		\$	4,334.00
chil disa rece	dren. The monthle bility payments for eived in accordance.	ly necessary income you receive by average of any child support pay or a dependent child, reported in Pa ce with applicable nonbankruptcy lended for such child.	ments, foster ca art I of Form 122	are payments, or 2C-1, that you		\$0	.00	
41. Fill in all qualified retirement deductions. The monthly total of all amounts that your employer withheld from wages as contributions for qualified retirement plans, as specifin 11 U.S.C. § 541(b)(7) plus all required repayments of loans from retirement plans, a specified in 11 U.S.C. § 362(b)(19).				olans, as specifie	d	\$0	.00_	
42. Tota	al of all deductio	ns allowed under 11 U.S.C. § 707	7(b)(2)(A). Copy	line 38 here	=>	\$3,979.	.00	
expe their	enses and you ha expenses. You r	al circumstances. If special circulate no reasonable alternative, described give your case trustee a detail ocumentation for the expenses.	ribe the special	circumstances a	nd			
Describ	e the special cir	cumstances		Amount of exp	ens	e		
			:	\$				
_				 \$		_		
_				·		_		
_								
			Total \$_	0.00		Copy nere=> \$ 	0.00	
44. Tot a	al adjustments. /	Add lines 40 through 43.		=>	\$_	3,979.00	Copy here=> -\$	3,979.00
45. Cal o	culate your mon	thly disposable income under §	1325(b)(2). Sub	tract line 44 from	line	39.	\$	355.00
Part 3:	Change in Inco	ome or Expenses						
have time you	e changed or are your case will be filed your petition	or expenses. If the income in Form virtually certain to change after the eopen, fill in the information below, a, check 122C-1 in the first column, in when the increase occurred, and	e date you filed y For example, if enter line 2 in t	vour bankruptcy p the wages repor he second colum	etitio ted i n, ex	on and during the ncreased after		
Form	Line	Reason for change		Date of chang	е	Increase or decrease?	Amount of o	change
☐ 122C ☐ 122C ☐ 122C ☐ 122C ☐ 122C ☐ 122C	-2 -1 -2					☐ Increase ☐ Decrease ☐ Increase ☐ Decrease ☐ Increase ☐ Decrease ☐ Decrease	\$ \$	
☐ 122C	-1			-		☐ Increase	-	
☐ 122C	-2					☐ Decrease	\$	

Debtor 1	Christopher Eric Reed	Case number (if known)	
Part 4:	Sign Below		
E	By signing here, under penalty of perjury you declare t	hat the information on this statement and in any attachments is true and correct.	

X /s/ Christopher Eric Reed Christopher Eric Reed Signature of Debtor 1

Date May 3, 2021 MM / DD / YYYY

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$78	administrative fee
<u>+</u> \$15	trustee surcharge
\$338	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their non-exempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

\$571 administrative fee

\$1,738 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$78	administrative fee
	\$278	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$78	administrative fee
	\$313	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

page 3

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/forms/bankruptcy-forms

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Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://www.uscourts.gov/services-forms/bankruptcy/credit-counseling-and-debtor-education-courses.

In Alabama and North Carolina, go to: http://www.uscourts.gov/services-forms/bankruptcy/cre dit-counseling-and-debtor-education-courses.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

United States Bankruptcy Court

		AKRON		
In re	Christopher Eric Reed		Case No.	
		Debtor(s)	Chapter	_13
	DISCLOSURE OF COMP	ENSATION OF ATTOR	RNEY FOR DE	EBTOR(S)
(Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 20 compensation paid to me within one year before the five rendered on behalf of the debtor(s) in contemplation	lling of the petition in bankruptcy,	or agreed to be paid	to me, for services rendered or to
	For legal services, I have agreed to accept		\$	4,000.00
	Prior to the filing of this statement I have receive			1,000.00
	Balance Due		\$	3,000.00
2.	The source of the compensation paid to me was:			
	■ Debtor □ Other (specify):			
3. ′	The source of compensation to be paid to me is:			
	■ Debtor □ Other (specify):			
4.	■ I have not agreed to share the above-disclosed con	mpensation with any other person	unless they are mem	bers and associates of my law firm.
	☐ I have agreed to share the above-disclosed compe copy of the agreement, together with a list of the			
5.	In return for the above-disclosed fee, I have agreed to	render legal service for all aspects	s of the bankruptcy c	ase, including:
1	 Analysis of the debtor's financial situation, and rerection. Preparation and filing of any petition, schedules, sometimes. Representation of the debtor at the meeting of credit. [Other provisions as needed] includes all services in Local Rights and 	tatement of affairs and plan which litors and confirmation hearing, an	may be required;	
6.]	By agreement with the debtor(s), the above-disclosed Adversary proceedings.	fee does not include the following	service:	
		CERTIFICATION		
	certify that the foregoing is a complete statement of ankruptcy proceeding.	any agreement or arrangement for	payment to me for re	epresentation of the debtor(s) in
M	ay 3, 2021	/s/ Dean D. Paoluc	cci	
D	ate	Dean D. Paolucci (Signature of Attorne Paolucci Law 1 Cascade Plaza		
		Akron, OH 44308 330-474-9529 Fa: dean@paoluccilaw		
		Name of law firm		

United States Bankruptcy Court AKRON

In re	Christopher Eric Reed		Case No.				
	·	Debtor(s)	Chapter	13			
VERIFICATION OF CREDITOR MATRIX							
The abo	ove-named Debtor hereby verifies that t	the attached list of creditors is true and c	correct to the best	of his/her knowledge.			
Date:	May 3, 2021	/s/ Christopher Eric Reed					
		Christopher Eric Reed					

Signature of Debtor

AMEX/DSNB 9111 Duke Blvd Mason, OH 45040-8999

Capital One Bank POB 30281 Salt Lake City, UT 84130

Capital One/WMT PO Box 30285 Salt Lake City, UT 84130

CB Indigo PO Box 4499 Beaverton, OR 97076

Citibank/BRKSB PO Box 6241 Sioux Falls, SD 57117-6241

Community Loan Servicing, LLC PO Box 740410 Cincinnati, OH 45274

Discover P.O. Box 29019 Phoenix, AZ 85038

First Premier Bank 601 S. Minnesota Ave. Sioux Falls, SD 57104

FNB Omaha 1620 Dodge St. Omaha, NE 68197

GM Financial Box 181145 Arlington, TX 76096

Kohls/Capital One POB 3115 Milwaukee, WI 53201 Lending Point LLC 1201 Roberts Blvd NW Kennesaw, GA 30144

Mariner Finance 4150 Tuscarawas St W Canton, OH 44708

Summa Physicians Inc. PO Box 76181 Cleveland, OH 44101-4755

SYNCB/Amazon PO BOX 965015 Orlando, FL 32896

SYNCB/BP POB 965024 Orlando, FL 32896

SYNCB/MensWarehouse POB 690061 Orlando, FL 32896

SYNCB/PPC PO BOX 965005 Orlando, FL 32896

SYNCB/PPMC PO BOX 965024 Orlando, FL 32896

WFDILLARDS
POB 14517
Des Moines, IA 50306